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#### **REDACTED - FOR PUBLIC INSPECTION**

June 28, 2016

Marlene H. Dortch Secretary Federal Communications Commission 445 12th Street, S.W. Washington, DC 20554

ATTENTION: WIRELINE COMPETION BUREAU

RE: Form 481 ETC filing pursuant to Sections 54.313 and 54.422 SAC 361476, MN, Sacred Heart Telephone Company Connect America Fund WC Dockets 10-90, 11-42 and 14-58

Dear Ms. Dortch:

Pursuant to Sections 54.313 and 54.422 of the Commission's Rules, please accept the attached FCC Form 481 of Sacred Heart Telephone Company, MN, SAC 361476 (the "Company") for filing with the Commission.

The Company is filing the attached redacted version via ECFS.

Kindly direct any questions regarding this transmittal to the undersigned. Thank you.

Sincerely,

Pamela Hintz

Senior Telecommunications Consultant <a href="mailto:phintz@otcpas.com">phintz@otcpas.com</a>
(651) 621-8535

**Enclosures** 

# REDACTED - FOR PUBLIC INSPEC 41 ON OMB Control No. 3060-0986/OMB Control No. 3060-0819

**Data Collection Form** 

July 2013

<010>	Study Area Code	361476
<015>	Study Area Name	SACRED HEART TEL CO
<020>	Program Year	2017
<030>	Contact Name: Person USAC should contact with questions about this data	Mark Aaberg
<035>	Contact Telephone Number: Number of the person identified in data line <030>	3208477109 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	maaberg@hcinet.net
	Form Type	54.313 and 54.422

(100) S Data C	(100) Service Quality Improvement Reporting Data Collection Form	FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	361476
<015>	Study Area Name	SACRED HEART TEL CO
<020>	, Program Vear	
<030>	Contact Name - Person USAC should contact regarding this data	soi. Mark Dahang
<035>	Contact Telephone Number - Number of person identified in data line <030>	3208477109 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	maaberg@hcinet.net
<110>	Has your company received its ETC certification from the FCC?	(yes/no)
<111>	If your answer to Line <110> is yes, do you have an existing \$54.202(a) "5 year plan" filed with the FCC?	(yes / no ) O O
<112>	If your answer to Line <111> is yes, please file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.  Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.  Please select the appropriate responses below (Yes, No, Not Applicable) to confirm	ompany is a Name of Attached Document
	that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to \$54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	-year e
<113><114><115> 115 115 117 118	Maps detailing progress towards meeting plan targets Report how much universal service (USF) support was received How much (USF) was used to improve service quality and how support was used to improve service coverage How much (USF) was used to improve service coverage and how support was used to improve service capacity Provide an explanation of network improvement targets not met	
	in the prior calendar year.	Tes

<ul> <li>&lt;010&gt; Study Area Code</li> <li>&lt;015&gt; Study Area Name</li> <li>&lt;020&gt; Program Year</li> <li>&lt;030&gt; Contact Name - Program Year</li> <li>&lt;035&gt; Contact Telephon</li> <li>&lt;035&gt; Contact Email Add</li> <li>&lt;210&gt; For the prior cal</li> <li>&lt;220&gt; Cab</li> <li>NORS</li> <li>Number</li> </ul>	Study Area Code  Study Area Name  Study Area Name  Program Year  Contact Name - Person USAC should contact regarding this data  Contact Email Address - Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030> 32084  Contact Email Address of person identified in data line <030  Contact Email Address of person identified in data line <030  Contact Email Address of person identified in data line <030  Contact Email Address of person identified in data line <030  Contact Email Address of person identified in data line <030  Contact Email Address of person identified in data line <030  Contact Emai	- Person USAC should contactions Number - Number of person USAC should contactions Number - Number of person Overses - Email Address of person of person year, were there calendar year, were there calendar year, were there calendar year, were there calendar year, were there bate Time	act regarding this person identified person identifiec re any reportal    	is data J in data line <03 d in data line <03 d in data line <03 d loutage End Time	361476 SACRED HEART TEL CO 2017 Mark Aaberg Mark Aaberg 300 maaberg@hcinet.net ce outages? <a href="mailto:recolar-right">recolar-right</a> CL1> Customers Affected Total N Customers Affected	EXT.  EXT.  No  Color of the co	<d>&gt;d&gt; 811 Facilities Affected (Yes / No)</d>	<e>&gt; Service Outage Description (Check all that apply)</e>	Af> Did This Outage Affect Multiple Study Anol	<g> Service Outage Resolution</g>	<\$\d\{\dagger}
Cols   Study Are	Year Iame - Person USA elephone Number mail Address - Em prior calendar yé	AC should cont:	act regarding thi person identified person identified re any reporta   	is data J in data line <03 d in data line <03 d loutate line <05 cble voice servin  Coutage End Time	SACRED HEART 2017 Mark Aaberg 0> 3208471109 e 30> maaberg@hcir ce outages? <c1> CLS Number of Customers Affected</c1>	TEL CO  SXt.  No  CC2>  Customers	<d>&gt;d&gt; 811 Facilities Affected (Yes / No)</d>	<e>&gt; Service Outage Description (Check all that apply)</e>		<g> Service Outage Resolution</g>	4
C020> Program   C030> Contact N   C035> Contact N   C035> Contact N   C035> Contact N   C035> Contact N   C036> C010>	Year lame - Person USA elephone Number mail Address - Em prior calendar ye	C should continuate of the sail Address of the sar, were the character to the character to the character than the the character than the character	act regarding thi person identified person identified re any reporta   	s data in data line <03 d in data line <02 d lo data line <02 d lo data line <07 d lo data line <07 Time	2017 Mark Aaberg 0> 3208477109 e 80> maaberg@hcir ce outages? <c1> <c1> Number of Customers Affected</c1></c1>	net .net No <c2>  Total Number of Customers</c2>	<d>&gt;d&gt; 911 Facilities Affected (Yes / No)</d>	<e>&gt; Service Outage Description (Check all that apply)</e>		<g> Service Outage Resolution</g>	Ćţ
<ul> <li>&lt;030&gt; Contact N</li> <li>&lt;035&gt; Contact T</li> <li>&lt;039&gt; Contact E</li> <li>&lt;210&gt; For the N</li> <li>&lt;220&gt; Cab</li> </ul> Nomble <ul> <li>Numbe</li> </ul>	elephone Number mail Address - Em orior calendar ye cb1> cc Outage Star r Date	C. Should continue of pail Address of all Address o	act regarding this person identified person identified re any reporta    	s data iin data line <03 d in data line <02 ble voice servi   	Mark Aaberg 0> 3208477109 e 80> maaberg@hcir. ce outages? <cl> <li><cl> Number of Customers Affected</cl></li></cl>	net .net No <c2>  Total Number of Customers</c2>	<d>&gt;d&gt; 911 Facilities Affected (Yes / No)</d>	<e>&gt; Service Outage Description (Check all that apply)</e>		<g> Service Outage Resolution</g>	44>
<ul> <li>&lt;035&gt; Contact I</li> <li>&lt;039&gt; Contact E</li> <li>&lt;210&gt; For the I</li> <li>&lt;220&gt; <a> NOR!</a></li> <li>Referen</li> <li>Numbe</li> </ul>	elephone Number mail Address - Em orior calendar ye   cb1> cb1> cc Outage Star Date	ail Address of ail Address of ail Address of asr, were the <a href="mailto:bbc"><b style="mailto:bbc"><b style<="" td=""><td>person identified person identified re any reporta      </td><td>in data line &lt;03 din data line &lt;03 dble voice servir     Time</td><td>0&gt; 3208477109 e 00 maaberg@hcirr ce outages? <c1> CLS  CLS  CLS  Customers Affected</c1></td><td>net .net No CC2&gt;  Total Number of Customers</td><td><d>&gt;d&gt; 911 Facilities Affected (Yes / No)</d></td><td><e>Service Outage Description (Check all that apply)</e></td><td></td><td><g> Service Outage Resolution</g></td><td>&lt;<del>\</del></td></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></b></a>	person identified person identified re any reporta    	in data line <03 din data line <03 dble voice servir     Time	0> 3208477109 e 00 maaberg@hcirr ce outages? <c1> CLS  CLS  CLS  Customers Affected</c1>	net .net No CC2>  Total Number of Customers	<d>&gt;d&gt; 911 Facilities Affected (Yes / No)</d>	<e>Service Outage Description (Check all that apply)</e>		<g> Service Outage Resolution</g>	< <del>\</del>
<210> For the   <210> To the   <220>	mail Address - Em  orior calendar ye  cb1>  cb2>  ch2  ch3  ch4  Date	ail Address of asr, were the cb2> t Outage Star	re any reporta chaster of the chaste	outage End Time	(Costomers Affected	No CC2>  Total Number of Customers	<d>&gt;d&gt; 911 Facilities Affected (Yes / No)</d>	<e>Service Outage Description (Check all that apply)</e>		<g> Service Outage Resolution</g>	< <del>\</del>
<210> For the   <220>	calendar ye chiban ye chiban ye chiban ye chiban ch	cb2> t Outage Star	cb3> cb3> rt Outage End Date	ble voice servii <a href="https://doi.org/10.10/">doi.org/<a href="https://doi.org/">doi.org/<a href="https://doi.org/">d</a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a>	ce outages?  (c1)  Number of  Customers Affected	Customers	<d>&gt;d&gt; 911 Facilities Affected (Yes / No)</d>	<e>&gt; Service Outage Description (Check all that apply)</e>		<g> Service Outage Resolution</g>	<b>√</b> 4√
	9	 cb2> t Outage Star Time		 Outage End Time	<c1> Number of Customers Affected</c1>	<c2> Total Number of Customers</c2>	<d>&gt;d&gt; 911 Facilities Affected (Yes / No)</d>	<e>Service Outage Description (Check all that apply)</e>		<g>&gt; Service Outage Resolution</g>	<u>\$</u>
NORR Referer Number	9	t Outage Star Time		Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)		Service Outage Resolution	
											Preventative Procedures
	_										

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(300) Un Data Col	(300) Unfuffilled Service Request Data Collection Form	FCC Form 481	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2013	
<010>	<010> Study Area Code	361476	
<015>	Study Area Name	SACRED HEART TEL CO	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Mark Aaberg	
<035>		3208477109 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	maaberg@hcinet.net	
<300>	<300> Unfulfilled service request (voice)		
<310>	<310> Detail on attempts (voice)		
	Nam	Name of Attached Document	
<320>	<320> Unfulfilled service request (broadband)	0	
<330>	<33()> Detail on attemnts (hroadhand)		
		Name of Attached Document	

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code 361476
<015>	Study Area Name SACRED HEART TEL CO
<020>	Program Year 2017
<030>	Contact Name - Person USAC should contact regarding this data
<035>	Contact Telephone Number - Number of person identified in data line <030> 3208477109 ext.
<039>	Contact Email Address - Email Address of person identified in data line maaberg@hcinet.net <030>
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<410>	Complaints per 1000 customers for fixed voice 0 . 0
<420>	Complaints per 1000 customers for mobile voice
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<440>	Complaints per 1000 customers for fixed broadband 0.0
<450>	Complaints per 1000 customers for mobile broadband

	npliance With Service Quality Standards and Consumer Protection Rules ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	361476	
<015>	Study Area Name	SACRED HEART TEL CO	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Mark Aaberg	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3208477109 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	maaberg@hcinet.net	
<500>	Certify compliance with applicable service quality standards and consumer pro-	otection rules Yes	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	361476MN510.pdf ules Compliance	

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(600) Functionality in Emergency Structure ACTED - FOR PUBLIC INSERTION
Data Collection Form OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	361476
<015>	Study Area Name	SACRED HEART TEL CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Mark Aaberg
<035>	Contact Telephone Number - Number of person identified in data line <030>	3208477109 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	maaberg@hcinet.net
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	361476MN610.pdf

1879   2000	ame sources it success	(700) P	rice Offerin	(700) Price Offerings including Voice Rate Data	Rate Data				FCC Form 481	ו 481	
Study Area Gode Succession into the control regarding this data and the control regarding the control regarding this data and the control regarding the control regarding this data and the control regarding this	Study Area Code	Data Co	ollection For	rm					OMB Cor July 2013	ntrol No. 3060-0986/OMB Co	ontrol No. 3060-0819
Study krea Name	Study Area Name   Study Area	<010>		3 Code			361476				
Program Veza   Program Veza	Contact Telephone Number of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   23647730 sec.   Contact Email Address of person identified in data line 4230   236	<015>		a Name			SACRED HEAD	TEL			
Contact Talesholoe Number - Number of person identified in data line -G130-   25/34973101 mst.	Sometan Name - Person USAC should condict regarding this data and at a line c1305 analysis of person learlifeed in data line c1305 analysis in the c1305 a	<020>		ear			2017				
Contact Telephone Number of person identified in data line c/300   Amademystications and the color of the contact Telephone Number of person identified in data line c/300   Amademystications are contact final Address - Email Address - E	Contact Telephone Number - Number of person identified in data line										

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Study Area Name   20,000   18,007   12,007   1	<010>	Study Area Code		36	61476						
Contact Enail Address of person identified in data line 433p>   Activities and person with the contact regarding this data into 433p>   Activities and person identified in data line 433p>   Activities and per	<015>	Study Area Name				CO					
Contact Name - Person USAC should contact regarding this data   State Name - Namber of person identified in data line 403D>   State Name - Namber of person identified in data line 403D>   State Name - Namber of person identified in data line 403D>   State Name - Namber of person identified in data line 403D>   Contact Final Address Chaile Name - Contact Final Address of person identified in data line 403D>   Contact Final Address of person	<020>	Program Year			2017						
Contact Telephone Number of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address - Fmail Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Contact Email Address of person Identified in data line 4030b mashersplications. Inst.  Con	<030>	Contact Name - Person US	AC should contact regarding t	this data	Mark Aaberg						
Contact Email Address of person identified in data line 4030 masks reginized and fees and fees and fees state (Mabpi) (Lipload Speed (Mabpi) (Gib) (Gi	<032>	Contact Telephone Numbe	er - Number of person identifi	ed in data line <030>	3208477109 ext.						
State Residential Rate Regulated Trotal fate and fees Download Speed (Maps) (GB) (GB) (GB) (GB) (GB) (GB) (GB) (GB	<039>	Contact Email Address - Em	nail Address of person identif	ied in data line <030>	maaberg@hcinet.r	net					
State Exchange (LEC) Residential Rate State Regulated State Regulated WorkSheet WorkSh											
Exchange (LEC) Residential Rate Fees Total Rate and Fees (Whips) Download Speed (Whips) Upload Speed (Whips) (GB) WORKSheet  See attached  Worksheet  See attached	<711>		<a2></a2>	 b1>	 	<>>>	<d1>&gt;</d1>	<d2></d2>	<q3></q3>	<d4>&gt;</d4>	,
See attached Worksheet		State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbbs)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select }	
- See attached worksheet											
Worksheet											
- See attached worksheet											
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					WOLKSLIGGT						
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Data Col	(800) Operating Companies Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
				July 2013
<010>	Study Area Code	361476		
<015>	Study Area Name	TOVAL	CO	
<020>	Program Year	2017		
<030>	Contact Name - Person USAC should contact regarding this data	Mark Aaberg		
<035>	Contact Telephone Number - Number of person identified in data line <030>	3208477109 ext.	τ.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	maaberg@hcinet.net	t.net	
<810>	Renorting Carrier Sacred Heart Telephone			
<811>				
<812>	Operating Company			
<813>	<a1></a1>		<a2></a2>	<a3></a3>
	Affiliates		SAC	Doing Business As Company or Brand Designation
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		See atta	See attached worksheet	
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(900) Tribal Lands Reporting	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	361476
<015> Study Area Name	SACRED HEART TEL CO
<020> Program Year	2017
<030> Contact Name - Person USAC should contact regarding this data	Mark Aaberg
<035> Contact Telephone Number - Number of person identified in data line <030>	3208477109 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	maaberg@hcinet.net
<900> Does the filing entity offer tribal land services? (Y/N)	No
<910> Tribal Land(s) on which ETC Serves	
<920> Tribal Government Engagement Obligation	
	Name of Attached Document
If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:	Select Yes or No or Not Applicable
<ul> <li>Yeasibility and sustainability planning;</li> <li>Yeasibility and sustainability planning;</li> <li>Marketing services in a culturally sensitive manner;</li> <li>Compliance with Rights of way processes</li> <li>Compliance with Land Use permitting requirements</li> <li>Compliance with Facilities Siting rules</li> </ul>	

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(1000) V Data Col	(1000) Voice and Broadband Service Rate Comparability Data Collection Form	FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013
<010>	Study Area Code	361476
<015>	, Study Area Name	SACRED HEART TEL CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Mark Aaberg
<032>		3208477109 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	maaberg@hcinet.net
<1000>	Voice services rate comparability certification $^{ m Yes}$	
<1010>	Attach detailed description for voice services rate comparability compliance	361476MN1010.pdf
		Name of Attached Document
<1020>	Yes Broadband comparability certification	- Pricing is no more than the most recent applicable benchmark announced by Wireline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance	361476MN1030.pdf
		Name of Attached Document

Care   Care	(00, ,)		
Study Area Code Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Lalephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030> Certify whether terrestrial backhaul options exist (Y/N)  Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 k upstream within the supported area pursuant to § 54.313(g).	(1100) No T Data Collect	errestrial Backhaul Reporting tion Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030> Certify whether terrestrial backhaul options exist (Y/N)  Certify whether terrestrial backhaul options exist (Y/N)  Please select the appropriate response (Yes, No. Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 k upstream within the supported area pursuant to § 54.313(g).		tudy Area Code	361476
Program Year  Contact Name - Person USAC should contact regarding this data  Contact Telephone Number - Number of person identified in data line <030>  Contact Email Address - Email Address of person identified in data line <030>  Contact Email Address - Email Address of person identified in data line <030>  Certify whether terrestrial backhaul options exist (Y/N)  Certify whether terrestrial backhaul options exist (Y/N)  Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 k upstream within the supported area pursuant to § 54.313(g).		tudy Area Name	SACRED HEART TEL CO
Contact Name - Person USAC should contact regarding this data  Contact Telephone Number - Number of person identified in data line <030>  Contact Email Address - Email Address of person identified in data line <030>  Certify whether terrestrial backhaul options exist (Y/N)  Certify whether terrestrial backhaul options exist (Y/N)  Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 h upstream within the supported area pursuant to § 54.313(g).		rogram Year	2017
Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030> Certify whether terrestrial backhaul options exist (Y/N)  Certify whether terrestrial backhaul options exist (Y/N)  Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 k upstream within the supported area pursuant to § 54.313(g).		ontact Name - Person USAC should contact regarding this data	Mark Aaberg
Contact Email Address - Email Address of person identified in data line <030>  Certify whether terrestrial backhaul options exist (Y/N)  Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 lupstream within the supported area pursuant to § 54.313(g).		ontact Telephone Number - Number of person identified in data line <030>	3208477109 ext.
Certify whether terrestrial backhaul options exist (Y/N)  Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).		ontact Email Address - Email Address of person identified in data line <030>	maaberg@hoinet.net
	<1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes
		ase select the appropriate response (Yes, No, Not Applicable) to confirm the porting carrier offers broadband service of at least 1 Mbps downstream and 256 I stream within the supported area pursuant to § 54.313(g).	sday

(1200) Terms and Condition for Lifeline Customers	FCC Form 481
Lifeline	OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Collection Form	July 2013
Chool Aros Codo	
Study Alea Code	
Study Afed Natifie	SACRED HEART TEL CO
<020> Program Year	
<030> Contact Name - Person USAC should contact regarding this data	tberg
<035> Contact Telephone Number - Number of person identified in data line <030> 3208477	3208477109 ext.
<039> Contact Email Address - Email Address of person identified in data line <030> maaberg	maaberg@hcinet.net
361476NN1210.pdf	olo.pdf
<1210> Terms & Conditions of Voice Telephony Lifeline Plans	
	Name of Attached Document
<1220> Link to Public Website	
"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must	
annually report:	
<1221> Information describing the terms and conditions of any voice   telephony service plans offered to Lifeline subscribers,	
<1222> Details on the number of minutes provided as part of the plan,	
<1223> Additional charges for toll calls, and rates for each such plan.	

(2000) Price C	(2000) Price Cap Carrier Additional Documentation		FCC Form 481	31
Data Collection Form	n Form		OMB Contro	OMB Control No. 3060-0986/OMB Control No. 3060-0819
Including Rate	Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		July 2013	
<010> Stuc	Study Area Code	361476		
<015> Stuc	Study Area Name	SACRED HEART TEL CO		
	Program Year	2017		
<030> Con	Contact Name - Person USAC should contact regarding this data	Mark Aaberg		
	Contact Telephone Number - Number of person identified in data line <030>	3208477109 ext.		
<039> Con	Contact Email Address - Email Address of person identified in data line <030>	maaberg@hcinet.net		
Select the a	Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.	e compliance as a recipien ,(c),(d),(e). The informatio	t of Incremental High Cost support, High Cost sun reported on this form and in the documents a	upport to offset access charge reductions, itached below is accurate.
Inc	Incremental Connect America Phase I reporting			
<2010>	2nd Year Certification 47 CFR § 54.313(b)(1)(i) - Note that for the Ju 2016 certification. this applies to Round 2 recipients of Incremental	Note that for the July 1 ents of Incremental		
	Support			
<2011>	3rd Year Certification 47 CFR § 54.313(b)(1)(ii) - Note	Note that for the July 1		
	Support	סו וווכן פווופוונפו		
<202>	Recipient certifies, representing year two after filing a notice of	a notice of		
	acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for	e locations in and Initiatives s Program for		
	projects that will provide broadband with speeds of at least 4	at least 4		
<2023>	The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect	nt of the total amount of meeting Connect		
	America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year two -	oanied by a list of census covers year two -		
<2024A>	Second 2 Recipient of Incremental Support?			
<2024B>	Attach list of census blocks indicating where funding was spent in year two - 54.313(b)(2)(ii). Round 2 recipients only.	was spent in year	Name of Attached Document Listing Required Information	
<2025A>	Round 1 or Round 2 Recipient of Incremental Support?	t?		
<2025B>	Attach geocoded Information for Phase I milestone reports (Round 1 for year three and Round 2 for year two) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-	eports (Round 1 for rica Fund , WC	Name of Attached Document Listing Required Information	
<2015>	2016 and future Frozen Support Certification 47 CFR	CFR § 54.313(c)(4)		

(2000) Price Cap Ca	(2000) Price Cap Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form Including Rate-of-Retu	Data Collection Form Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
Price	Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}	
<2016> <b>Connect</b>	0.16> Certification support used to build broadband Connect America Phase II Reporting {47 CFR § 54.313(e)}	
<2017A>	Connect America Fund Phase II recipient?	
<2017B>	Attach information for Phase II - 54.313(e)(1) - list of geocoded locations already meeting the 54.309 public interest obligations at the end of calendar year 2015 and total amount of Phase II support, if any, the price	Name of Attached Document Listing Required Information
<2018>	cap carrier used for capital expenditures in 2015. Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(2)(ii)	Name of Attached Document Listing Required Information
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(2)(v)	
<2020>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 40% of its supported locations in the state on December 31, 2017 - 54.313(e)(3)	
<2021>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 60% of its supported locations in the state on December 31, 2018 - 54.313(e)(4)	
<2026>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 80% of its supported locations in the state on December 31, 2019 - 54.313(e)(5)	
<2027>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 100% of its supported locations in the state on December 31, 2020 - 54.313(e)(6)	

(3005) Rate Of Return Carrier Additional Documentation FCC Form 481

Data Collection Form OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	361476
<015>	Study Area Name	SACRED HEART TEL CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Mark Aaberg
<035>	Contact Telephone Number - Number of person identified in data line <030>	3208477109 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	maaberg@hcinet.net

Complete the items below to note compliance with five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)				
		Yes - Attach Cer	tification		
(3010A)	Milestone Certification {47 CFR § 54.313(f)(1)(i)}		3614	176mn3010.pdf	1
(3010B)	Please Provide Attachment	Name of Attached Document Listing Requ Information	uired		
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	No - No New Community Anchors			ı
(3012B)	Please Provide Attachment	Name of Attached Document Listing Requ	uired		
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)			
(3014)	If yes, does your company file the RUS annual report	(Yes/No)			
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers) Document(s) with Balance Sheet, Income Statement				
(3017)	and Statement of Cash Flows If the response is yes on line 3014, attach your	Name of Attached Document Listing Requ	uired		
	company's RUS annual report and all required documentation	Information			┙
(3018)	If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	(Yes/No) •	<i>y</i>		
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been		<i>✓</i>		
(3023)	subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers Underlying information subjected to a review by an independent certified public accountant				
(3024)	Underlying information subjected to an officer certification.				
(3025)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows				
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Requ Information		61476MN3026.pdf	

FCC Form 48.1	OMB Control No. 3060-0986/OMB Control No. 3060-0819	July 2013	
(3005) Rate Of Return Carrier Additional Documentation (Continued)	Data Collection Form		

O310>         Study Area Code         3 61.476           O315>         Study Area Name         SACRED HEART TEL CC           O202>         Program Year         20.17           CO32>         Contact Name - Person USAC Should contact regarding this data         Mark Aaberg           O335         Contact Telephone Number - Number of person identified in data line <0.30>         32.08477109 ext.           O335         Contact Femal Address- Email Address of person identified in data line <0.30>         3.08477109 ext.		RT TEL CO		, D:	ext.	thet.net
erson USAC should co e Number - Number	361476	SACRED HEART TEL CO	2017	Mark Aaberg	3208477109	330> maaberg@hci
	study Area Code	study Area Name	Program Year	Contact Name - Person USAC should contact regarding this data	umber - Numbe	ddress - Email Address



(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



Name of Attached Document Listing Required Information

(4005) Rural Broadband Experiment Additional Documentation
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	361476
<015>	Study Area Name	SACRED HEART TEL CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Mark Aaberg
<035>	Contact Telephone Number - Number of person identified in data lin	e <030> 3208477109 ext.
<039>	Contact Email Address - Email Address of person identified in data lin	ne <030> maaberg@hcinet.net

#### 4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

#### Public Interest Obligations - FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

**4001.** Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

#### Community Anchor Institutions - FCC 14-98 (paragraph 79)

**4003a**. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

#### If yes to 4003A, please provide a response for 4003B.

relevant geographic area.

<b>4003b.</b> Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information	
Broadband Deployment Locations – FCC 14-98 (par	agraph 80)	
<b>4004a</b> . Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.	Name of Attached Document Listing Required Information	
<b>4004b</b> . Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband speed and data usage allowances available in the	Name of Attached Document Listing Required Information	

Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	361476
<015>	Study Area Name	SACRED HEART TEL CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Mark Aaberg
<035>	Contact Telephone Number - Number of person identified in data line <030>	3208477109 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	maaberg@hcinet.net

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

361476

Study Area Code of Reporting Carrier:

# Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: SACRED HEART TEL CO Signature of Authorized Officer: CERTIFIED ONLINE Date 06/23/2016 Printed name of Authorized Officer: Bruce Hanson Title or position of Authorized Officer: Treasurer Telephone number of Authorized Officer: 3208472211 ext.

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Filing Due Date for this form: 07/01/2016

	ion - Agent / Carrier ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	361476	
<015>	Study Area Name	SACRED HEART TEL CO	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Mark Aaberg	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3208477109 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	maaberg@hcinet.net	

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual	Reports for CAF or LI Recipients on Behalf of Reporting Carrier
I certify that (Name of Agent)	
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier: Filing Due Date f	or this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under under Title 18 of the United States (	, , , , , , , , , , , , , , , , , , , ,

#### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of	Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Report	ting Carrier
	m authorized to submit the annual reports for universal service support recipients on behalf of the by the reporting carrier; and, to the best of my knowledge, the information reported herein is accur	
Name of Reporting Carrier:		
Name of Authorized Agent Firm:		
Signature of Authorized Agent or Employee of Age	t: Date	e:
Name of Authorized Agent Employee:		
Title or position of Authorized Agent or Employee	f Agent	
Telephone number of Authorized Agent or Employ	e of Agent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	
Persons willfully making false statements on	his form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), 18 of the United States Code, 18 U.S.C. § 1001.	, or fine or imprisonment under Title

Attachments

(700) Pri	ce Offerings	(700) Price Offerings including Voice Rate Data	Data				A	FCC Form 481	
Data Col	Data Collection Form	u					O O	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	B Control No. 3060-0819
<010>	Study Area Code	Code			361476				
<015>	Study Area Name	Name			SACRED HEART TEL CO	RT TEL CO			
<020>	Program Year	ear			2017				
<030>		Contact Name - Person USAC should contact regarding this data	d contact regard	ling this data	Mark Aaberg	д			
<032>		Contact Telephone Number - Number of person identified in data line <030>	ber of person ide	entified in data line	<030> 3208477109 ext.	ext.			
<039>		Contact Email Address - Email Address of person identified in data line <030>	ess of person id	entified in data line		inet.net			
<701>		Residential Local Service Charge Effective Date	fective Date	1/1	1/1/2016				
<702>		Single State-wide Residential Local Service Charge	Service Charge						
<703>									_
	<a1></a1>	<a2></a2>	<a3></a3>	 	<bs></bs>	 	 b4>	<92>	<>>>
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fees
	MN	Sacred Heart	-	FR	16.0	0.0	0.0	0.0	

								July 2013	
<010> Study	Study Area Code				361476				
	Study Area Name				SACRED HEART TEL CO	EL CO			
	Program Year				2017				
	act Name - Perso	n USAC should	Contact Name - Person USAC should contact regarding this data	this data					
	act Telephone N	umber - Numb	er of person identi	Contact Telephone Number - Number of person identified in data line <030>	. 3208477109 ext.				
<039> Cont	act Email Addres	s - Email Addre	ess of person ident	Contact Email Address - Email Address of person identified in data line <030>	> maaberg@hcinet.net	net			
<711>	<a1></a1>	<a2></a2>	 	<	<c> <d1></d1></c>	<d2></d2>	<d3></d3>		<d4>&gt;</d4>
\$		Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Broadband Service Usag Download Speed -Upload Speed (Mbps) (GB)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
M	Sacred Heart	Heart	40.95	0.0		12.0	1.0	0.0	Other, no usage on limit allowance

(800) Operating Companies		FCC Form 481
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
And Chinds A was Code		
	SACRED HEART TEL CO	
	2017	
<030> Contact Name - Person USAC should contact regarding this data	Mark Aaberg	
<035> Contact Telephone Number - Number of person identified in data line <030>	3208477109 ext.	
<039> Contact Email Address - Email Address of person identified in data line <030>	maaberg@hcinet.net	
<810> Reporting Carrier Sacred Heart Telephone		
Holding Company		
<813>	<a2></a2>	<83>
Affiliates	SAC	Doing Business As Company or Brand Designation
Clara City Telephone	361370	Clara City Telephone
Sacred Heart Telephone	361476	Sacred Heart Telephone
	361487	Starbuck Telephone
Ft Randall Telephone	391660	Ft Randall Telephone & Mount Rushmore Telephone
Zumbrota Telephone	361515	
Telephone Service Company	300659	Telephone Service Company
nt Teleg	300633	Middle Point Telephone
	_	

SAC: 361476 State: MN

**Sacred Heart Telephone Company** 

Form 481 Line No. 112 Five Year Network Improvement Plan

## PROGRESS REPORT ON SERVICE QUALITY IMPROVEMENT PLAN



LINE 113 – MAPS DETAILING PROGRESS TOWARDS MEETING PLAN TARGETS
LINE 114 thru 117 UNIVERSAL SERVICE

<sup>&</sup>lt;sup>1</sup> 47 U.S.C. § 254(e). <sup>2</sup> 47 C.F.R. § 54.314(a).

<sup>&</sup>lt;sup>3</sup> 47 C.F.R. § 54.314(b).



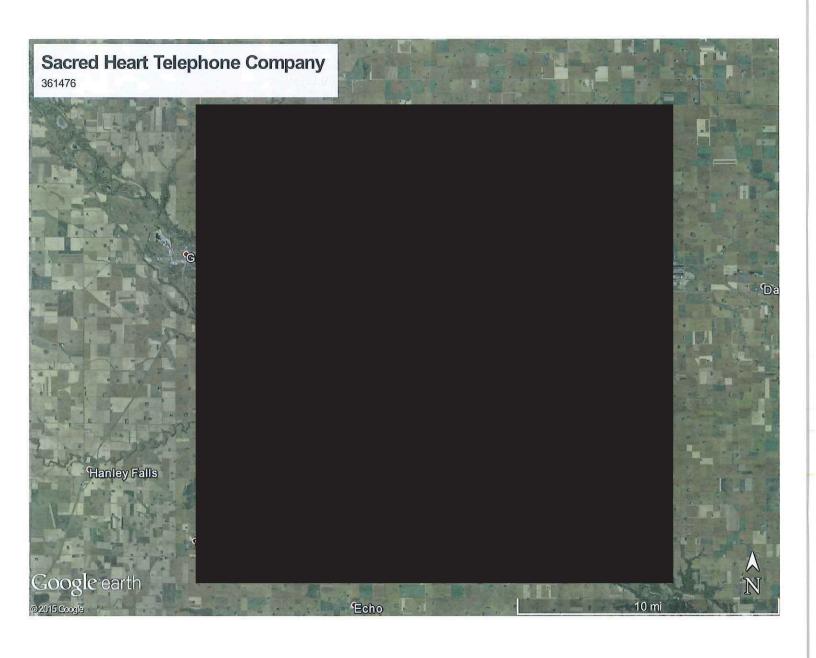
<sup>&</sup>lt;sup>4</sup> See USF/ICC Transformation Order at Para. 612.

<sup>&</sup>lt;sup>5</sup> *Id.* 

<sup>&</sup>lt;sup>6</sup> *Id.* (emphasis supplied).







Page 1 of 2

SAC: 361476 State: MN

Sacred Heart Telephone

Form 481 Line No. 510 Compliance with Service Quality Standards and Consumer Protection

\_\_\_\_\_\_

As required by MN. Rule "7812.0700 Minnesota General Service Quality Requirements. Subpart 1" the local services provided by Sacred Heart Telephone are provided under internal company operating procedures and publically available tariffs which are in compliance with applicable Minnesota Public Utility Commission orders and rules including:

7810.0100 DEFINITIONS. 7810.0200 SCOPE. 7810.0300 STATUTORY AUTHORITY.

#### **RECORDS AND REPORTS**

7810.0400 RETENTION OF RECORDS.
7810.0500 DATA TO BE FILED WITH THE COMMISSION.
7810.0600 REPORT TO COMMISSION ON SERVICE DISRUPTION.
7810.0900 LOCATION OF RECORDS.

#### **CUSTOMER RELATIONS**

7810.1000 INFORMATION AVAILABLE TO CUSTOMER AND PUBLIC. 7810.1100 COMPLAINT PROCEDURES.

7810.1200 RECORD OF COMPLAINT.

#### **CUSTOMER BILLING; DEPOSIT AND GUARANTEE REQUIREMENTS**

7810.1400 CUSTOMER BILLING.

7810.1500 DEPOSIT AND GUARANTEE REQUIREMENTS.

7810.1600 DEPOSIT.

7810.1700 GUARANTEE OF PAYMENT.

#### DISCONNECTION OF SERVICE; SERVICE DELAY

7810.1800 PERMISSIBLE SERVICE DISCONNECTIONS WITH NOTICE.

7810.1900 PERMISSIBLE SERVICE DISCONNECTIONS WITHOUT NOTICE.

7810.2000 NONPERMISSIBLE REASONS TO DISCONNECT SERVICE.

7810.2100 MANNER OF DISCONNECTION.

7810.2200 RECONNECTION OF SERVICE.

7810.2300 NOTICE REQUIREMENTS.

7810.2400 BILL DISPUTES.

7810.2500 ESCROW PAYMENTS.

7810.2600 WAIVING RIGHT TO DISCONNECT; EMERGENCY STATUS.

7810.2800 DELAY IN INITIAL SERVICE OR UPGRADE.

#### **DIRECTORIES**

7810.2900 CONTENT OF DIRECTORIES.

7810.3000 DIRECTORY ASSISTANCE.

7810.3100 CHANGES OR ERROR OF LISTED NUMBER.

#### **ENGINEERING**

7810.3200 CONSTRUCTION OF TELEPHONE PLANT.

7810.3300 MAINTENANCE OF PLANT AND EQUIPMENT.

7810.3900 EMERGENCY OPERATIONS.

Page 2 of 2

SAC: 361476 State: MN

Sacred Heart Telephone

Form 481 Line No. 510 Compliance with Service Quality Standards and Consumer Protection

\_\_\_\_\_\_

#### **INSPECTIONS, TESTS, SERVICE REQUIREMENTS**

7810.4100 ACCESS TO TEST FACILITIES.

7810.4300 ACCURACY REQUIREMENTS.

7810.4900 ADEQUACY OF SERVICE.

7810.5000 UTILITY OBLIGATIONS.

7810.5100 TELEPHONE OPERATORS.

7810.5200 ANSWERING TIME.

7810.5300 DIAL SERVICE REQUIREMENTS.

7810.5400 INTEROFFICE TRUNKS.

7810.5500 TRANSMISSION REQUIREMENTS.

7810.5800 INTERRUPTIONS OF SERVICE.

7810.5900 CUSTOMER TROUBLE REPORTS.

7810.6000 PROTECTIVE MEASURES.

7810.6100 SAFETY PROGRAM.

Sacred Heart Telephone is in compliance with Federal CPNI rules, Red Flag Rules and other Federal and State requirements governing the protection of Customer's privacy.

Page 1 of 1

SAC: 361476 State: MN

Sacred Heart Telephone

Form 481 Line No. 610 Description of Functionality in Emergency Situations

Sacred Heart Telephone pursuant to MN Rule "7810.390 Emergency Operations" has:

- Established reasonable provisions' to meet emergencies resulting from failures of lighting or power service, sudden and prolonged increases in traffic, illness of operators or from fire, storm, or acts of God including provisions for emergency power that meet or exceed the rule requirement to provide:
  - o A minimum of four hours of battery service in each central office.
  - o A permanently installed power unit in exchanges exceeding 5000 lines.
  - Mobile power units that can be delivered on short notice and which can be readily.
     connected in offices without installed emergency power facilities.
- Has informed employees as to the procedures to be followed, including reasonable rerouting of traffic around damaged facilities and the deployment of emergency power, in the event of emergency in order to prevent or mitigate interruption or impairment of telecommunications service.

SAC: 361476 State: MN

Sacred Heart Telephone

Form 481 Line No. 1010 Descriptive document for Voice Services Rate Comparability

Line 1010 – Description of Voice Services Rate Comparability: Provide a detailed description of how your pricing of fixed voice services is no more than two standard deviations above the applicable national average urban rate for voice service, as published annually by the Wireline Competition Bureau, as required in 47 C.F.R. § 54.313(a)(10).

On April 5, 2016 the Wireline Competition Bureau announced results of the Urban Rate Survey for Voice Services; as part the FCC Public Notice DA 16-362. Referenced in this public notice are the results required to meet the rate comparability as noted:

"Based on the survey responses, the Bureau also calculated the reasonable comparability benchmark for voice services to be \$41.07

3. Id. at 17694, para. 84."

As required Sacred Heart Telephone hereby certifies that its current fixed voice services for residential subscribers as defined in the USF/ICC Transformation Order is below \$41.07.

SAC: 361476 State: MN

Sacred Heart Telephone

Form 481 Line No. 1030 Descriptive document for Broadband Service Rate Comparability

Line 1030 – Description of Broadband Service Rate Comparability: Provide a detailed description of how your pricing of a Broadband service meeting the Commission's Public Interest Obligations is no more than the applicable benchmark, as published annually by the Wireline Competition Bureau, pursuant to 47 C.F.R. § 54.313(a)(12).

On April 5, 2016 the Wireline Competition Bureau announced the results of the Urban Rate Survey for Broadband Service as part of FCC Public Notice DA 16-362. Referenced in this public notice are the results required to meet the rate comparability as noted:

"Based on the survey results, the reasonable comparability benchmark calculations for broadband services can be calculated at http://www.fcc.gov/encyclopedia/urban=rate-survey-data."

As required Sacred Heart Telephone hereby certifies that it offers a Broadband service to residential subscribers at pricing that is no more than the applicable benchmark rate.

Page 1 of 3

SAC: 361476 State: MN

Sacred Heart Telephone

Form 481 Line No. 1210 Lifeline Plans Terms and Conditions

Sacred Heart Telephone does adhere to all Federal Lifeline eligibility rules and regulations as well as Minnesota Administrative Rule "7817.0400 - Eligibility for Telephone Assistance Credits" which states:

### Minnesota Administrative Rule 237 Chapter 7817.0400

Subpart 1. Information provided. Each local service provider shall annually mail a notice of the availability of the telephone assistance plan to each residential subscriber in a regular billing. If a subscriber has chosen to receive the regular billing other than through U.S. mail, the local service provider shall send the notice in a regular billing using the delivery method chosen by the subscriber for delivery of the regular billing. The notice must state the following: YOU MAY BE ELIGIBLE FOR ASSISTANCE IN PAYING YOUR TELEPHONE BILL IF YOU RECEIVE BENEFITS FROM CERTAIN LOW-INCOME ASSISTANCE PROGRAMS OR MEET CERTAIN INCOME LIMITS. FOR MORE INFORMATION OR AN APPLICATION FORM PLEASE CONTACT

<u>(local service provider)</u>. On request, the local service provider shall mail to a person an application form developed by the commission and the Department of Commerce, and a brochure that describes the telephone assistance plan's eligibility requirements and application process.

**Subpart 2. Application process.** On completing and signing the application certifying under penalty of perjury that the information provided by the applicant is true and that the statutory criteria for eligibility are satisfied, the applicant must return it to the local service provider for enrollment in the telephone assistance plan. An application may be made by the subscriber, the subscriber's spouse, or a person authorized by the subscriber to act on the subscriber's behalf.

Subpart 4. Eligibility criteria. To be eligible for a telephone assistance credit the applicant must:

- A. be a subscriber who resides in Minnesota or has moved to Minnesota and intends to remain; and
- B. be eligible for the federal Lifeline telephone service discount.

**Subpart 7. Applicant and recipient responsibilities.** Each applicant and each recipient shall provide current information to the local service provider about permanent changes that affect the applicant's or recipient's eligibility.

### Subpart 8. Local service provider responsibilities.

- A. A local service provider shall begin providing telephone assistance credits to an applicant in the earliest possible billing cycle but not later than the second billing cycle following submission of a completed application demonstrating eligibility. If certified, the local service provider shall notify the applicant by, for example, placing telephone assistance credits on the bill.
- B. If an applicant is denied eligibility, the local service provider shall notify the applicant in writing of the reasons for the denial, of the right to appeal, and of the right to reapply.

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SAC: 361476 State: MN

Sacred Heart Telephone

Form 481 Line No. 1210 Lifeline Plans Terms and Conditions

Sacred Heart Telephone Local service rates that serve as its Lifeline Plans are filed in Compliance with the
regulatory requirements of Minn. Rules Ch. 7810 and Minn. Rules pt. 7812.0600 as follows:

ory requirer	ments of within Rales en. 7010 and within Rales pt. 7012.0000 as follows.
A. The tarif	fs or price lists of local exchange carriers must offer the following services to all
	customers pursuant to Minn. Rules pt. 7812.0600 (basic service requirements):
	single party voice-grade service and touch-tone capability;
	911 or enhanced 911 access;
	1 + intraLATA and interLATA presubscription and code-specific equal access to interexchange carriers subscribing to its switched access service;     access to directory assistance, directory listings, and operator services;     toll and information service-blocking capability without recurring monthly charges one white pages directory per year for each local calling area, which may include more than one local calling area, except where an offer is made and explicitly refused by the customer;
	a white pages and directory assistance listing, or, upon customer request, a private listing that allows the customer to have an unlisted or unpublished telephone number;
	call-tracing capability according to chapter 7813;
	(i) call Trace provisions in tariff mirror Commission's tariff templates.
	blocking capability according to the Commission's ORDER ESTABLISHING CONDITIONS FOR THE PROVISION OF CUSTOMER LOCAL AREA SIGNALING SERVICES, Docket No. P999/CI-92-992 (June 17, 1993) and its ORDER AFTER RECONSIDERATION, Docket No. P999/CI-92-992 (December 3, 1993).
	telecommunications relay service capability or access necessary to comply with state and federal regulations.

B. A Separate flat rate service offering is required pursuant to Minn. Rules pt. 7812.0600, subpt. 2. At a minimum, each local service provider (LSP) shall offer the services identified in Minn. Rules pt. 7812.0600, subpt. 1 as a separate tariff or price list offering on a flat rate basis. An LSP may also offer basic local service on a measured rate basis or in combination with other services. An LSP may impose separate charges for the services set forth in subpart 1 only to the extent permitted by applicable laws, rules, and commission orders.

Page 3 of 3

SAC: 361476 State: MN

Sacred Heart Telephone

Form 481 Line No. 1210 Lifeline Plans Terms and Conditions

C. Service area obligations under Minn. Rules pt. 7812.0600, subpt. 3: An LSP shall provide its local services on a nondiscriminatory basis, consistent with its certificate under part 7812.0300 or 7812.0350, to all customers who request service and whose premises fall within the carrier's service area boundaries or, for an interim period, to all requesting customers whose premises fall within the operational areas of the local service provider's service area under part 7812.0300, subpart 4, or 7812.0350, subpart 4. The obligation to provide resale services does not extend beyond the facilities-based services does not require an LSP that is not an eligible telecommunications carrier (ETC) to build out its facilities to customers not abutting its facilities or to serve a customer if the local service provider cannot reasonably obtain access to the point of demarcation on the customer's premises. service capability of the underlying carrier whose service is being resold. The obligation to provide

The flat rate services, offered pursuant to Minn. Rules pt. 7812.0600, subpt. 2., include unlimited local service minutes of use. The local services offerings do not include any toll minutes of use. The rates for any toll usage are determined by the rate plans of the Toll Provider(s) that end users are selected by lifeline by end users.

The specific Company terms and conditions for the Companies Lifeline Plans are set forth in the tariff pages included in Exhibit 1, attached.

Exhibit 1

SAC: 361476 State: MN

Sacred Heart Telephone

Form 481 Line No. 1210 Lifeline Plans Terms and Conditions

SACRED HEART TELEPHONE COMPANY SACRED HEART, MINNESOTA

Section 5 Page 53A Revision 7

(N)

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(D)

(T)

### **GENERAL SERVICES**

### LIFELINE AND MINNESOTA TELEPHONE ASSISTANCE PLAN (TAP)

The Lifeline Assistance (Lifeline) program, established by the Federal Communications Commission under 47CFR54, is a means of maintaining and preserving universal service by providing a reduction in the recurring price of basic local residential exchange access service to qualifying low-income residential subscribers.

TAP is a state sponsored assistance program under Minnesota Statutes Chapter 237 and is designed to make telephone service accessible to qualifying low-income residential households. Through this program, eligible households will receive a monthly discount on their telephone service.

### 1. General

- a. Lifeline is a federally-funded reduction of the Federal End User Common Line Charge and a reduction of local service charges. The Federal Lifeline Credit shall be applied first to reduce the Federal End User Common Line Charge, with any remaining federal credit to be applied to reduce rates for residential service. The state TAP credit shall be applied to further reduce the rates charged for residential services.
- b. Federal Universal Service Charge (FUSC) will not be billed to Lifeline customers.
- Local service for Lifeline subscribers may not be disconnected for non-payment of toll charges.
  - 1). Toll Restriction Service will be provided to Lifeline subscribers at no charge.
  - Lifeline subscribers are not required to accept Toll Restriction Service as a condition to avoid disconnection of local service for non-payment of toll.
  - 3). Lifeline subscribers are not required to pay a service deposit in order to initiate service if the subscriber voluntarily elects to receive Toll Restriction Service.
- d. Partial payments from Lifeline subscribers will be applied first to local service charges and then to toll charges.

### 2. Eligibility Requirements

- a. Lifeline will be provided for one (1) telephone line per household, at the subscriber's principal place of residence, to those individuals who meet the eligibility requirements.
- b. The applicant has income at or below 135 percent of the Federal Poverty Guidelines or participates in one of the following programs:
  - Medicaid/Medical Assistance
  - Food Support/Food Stamps
  - Minnesota Family Investment Program (MFIP)
  - Supplemental Security Income
  - Federal Public Housing Assistance or Section 8
  - Low Income Home Energy Assistance Program (LIHEAP)
  - National School Lunch Program's Free Lunch Program
  - Temporary Assistance for Needy Families (TANF)

Effective: 8-1-12

SACRED HEART TELEPHONE COMPANY SACRED HEART, MINNESOTA

Section 5 Page 53C Revision 7

#### GENERAL SERVICES

### LIFELINE AND MINNESOTA TELEPHONE ASSISTANCE PLAN (TAP) (Continued)

### 5. Regulations

- a. The Federal Lifeline and state TAP credit will begin at the customer's earliest possible billing cycle but no later than the second billing cycle after the date the application for the Federal Lifeline and state TAP credit is received by the telephone company.
- A service charge shall not be billed to establish qualification for either the Federal Lifeline or state TAP credit.
- c. When a customer enrolls for the state TAP credit, the Company is reimbursed for the cost of the service order activity.

### 6. Funding

The Federal Lifeline Credit is funded through the FCC universal service program. The state TAP credit shall be funded through the state Telephone Assistance Plan Surcharge on residence and business access lines which pay the 911 surcharge.

### 7. Rates

The surcharge rate is the effective rate ordered by the Minnesota Public Utilities Commission. The company is responsible for billing, collecting and remitting the surcharge to appropriate government agency.

	Monthly Rate	
State TAP Credit	\$2.50	
Federal Lifeline Credit	\$9.25	(C)
		(D)

(D)

Effective: 8-1-12

SACRED HEART TELEPHONE COMPANY SACRED HEART, MINNESOTA

Section 4 Page 2 Revision 4

### LOCAL EXCHANGE SERVICE

### Rates

Exchange - Sacred Heart

Class of Service	Monthly Rates		
BUSINESS:	4.00.70		
One Party	\$ 22.50		
Key System Line	22.50		
Basic Coin Telephone Service	22.50		
RESIDENCE:			
One Party	16.00 (I)		

All rates are billed in advance. Payment for service is due when the statement is rendered.

Vacation rate service is available for customers requiring less than 12 months of service per year. The rate for vacation service is determined in accordance with section 5, page 51 of this tariff book.

Effective: <u>12-1-14</u>

SACRED HEART TELEPHONE COMPANY SACRED HEART, MINNESOTA

Section 9 Page 1

### LONG DISTANCE SERVICE

### LONG DISTANCE SERVICE

(N)

### TERMS AND CONDITIONS

#### Services Provided

The Company provides access to facilities, services and equipment over which customers may transmit voice, data and other communications of their own choosing to intrastate and interstate destinations.

### II. Charges, Bills and Payment for Service

- a. Service is provided and billed on a monthly basis pursuant to the general terms and conditions of this tariff, and will continue to be provided and billed until canceled by the customer or terminated by the Company.
- The Company will pass through to its customers all applicable federal, state and local taxes or surcharges.

#### III. RATES:

#### 1. Standard Toll Service - Per Minute Plan

#### a. Application of Rates

Standard Toll Service – Per Minute Plan is available to business and residential customers for outbound calling, 24 hours each day. Calls are billed in an initial thirty (30) second increment, thereafter in 6-second increments, and originate and terminate on customer-provided switched access lines. Rates are not mileage sensitive. This service is offered on a month-to-month basis. No minimum commitment is required.

#### b. Rates:

IntraLATA per minute rate (8:00 AM to 6:00 PM Monday to Friday)	\$ .23
IntraLATA per minute rate (all other periods)	.11
InterLATA per minute rate (all hours)	.15

Effective: 12-1-08

SACRED HEART TELEPHONE COMPANY SACRED HEART, MINNESOTA

Section 9 Page 2

### LONG DISTANCE SERVICE

(N)

### LONG DISTANCE SERVICE (Continued)

- III. RATES: (Continued)
  - 2. Long Distance Toll Plans
    - a. Application of Rates

Long Distance Toll Plans are available to business and residential customers for outbound calling 24 hours each day. Calls are billed in an initial thirty (30) second increment, thereafter in 6-second increments, and originate and terminate on customer-provided switched access lines. Rates are not mileage or time-of-day sensitive. This service is offered on a month-to-month basis. No minimum commitment is required.

b.	Residence Rates:  1) Monthly Flat Rate Plan:     Installation charge     Monthly Recurring Charge     Per minute rate (all hours)	\$ .00 4.95 .07
	Unlimited Toll Plan     Monthly recurring charge	\$ 14.95#
C.	Business Rates:  1) Monthly Flat Rate Plan:     Installation charge     Monthly Recurring Charge     Per minute rate (all hours)	\$ .00 4.95 .07
	Unlimited Toll Plan     Monthly recurring charge	\$ 25.00 ##

- # Unlimited is restricted to non-business activities and not for dial-up internet service. Any usage in excess of 5,000 minutes per month would be subject to review and termination.
- ## Unlimited is a per-line charge restricted to non-call center activities and not for dial-up internet service. Any usage in excess of 5,000 minutes per month would be subject to review and termination.

Effective: 12-1-08

SAC: 361476 State: MN

Sacred Heart Telephone

Response to Line 3010 – Milestone Certification (47 CFR §54.313(f)(1)(i))

Sacred Heart Telephone hereby certifies that throughout 2015, it took reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 4 Mbps downstream/1 Mbps upstream, and currently, it is taking reasonable steps to provide upon reasonable request actual speeds of at least 10 Mbps downstream/1 Mbps upstream broadband service at with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas as determined in an annual survey, and that requests for such service are met within a reasonable amount of time.

SAC: 361476 State: MN

Sacred Heart Telephone Company

Form 481 Line No. 3017 RUS Annual Report

### **ATTACHMENT REDACTED IN ENTIRETY**